

DEPARTMENT OF LIVESTOCK

PO BOX 202001

HELENA, MONTANA 59620-2001

www.liv.mt.gov



DEPARTMENT OF LIVESTOCK (406) 444-7323

ANIMAL HEALTH & FOOD SAFETY DIVISION (406) 444-2043

BRANDS ENFORCEMENT DIVISION (406) 444-2045

CENTRALIZED SERVICES DIVISION (406) 444-4993

FAX (406) 444-1929

DSA Brucellosis Test/Adult Vaccination Reimbursement Request for Veterinarians**Instructions:**

1. Form is for testing or adult vaccination conducted **July 1, 2018 thru June 30, 2019 (FY 19)**
2. Submit requests within 60 days of test AND prior to July 1, 2019.
3. Submit complete vaccination certificates with all adult vaccination requests.
4. Reimbursement rates: \$8.50/head tested at a market, \$4/head for adult vaccination, testing on ranch \$12/head for 1-10 head, \$10/head for 11-50 head, \$7.50 for >50 head,
5. Be as specific as possible with Reason for Test.
6. Use continuation pages if submitting reimbursement for more than 9 tests/vaccinations at a time.

Make check

payable to: _____

Date submitted: _____

Address: _____

Phone: _____

City/State/Zip: _____

Veterinarian Signature _____

Owner/Ranch/Market Name	Acc.#/Case #	# Head	Reason for Test	Total Amt
LID/PIN	Blood Draw Date	Rate	(Please be as specific as possible)	
1				
2				
3				
4				
5				
6				
7				
8				
9				

Return form to Brooke Ruffier: brooke.ruffier@mt.gov, fax: (406) 444-1929, PO Box 202001, Helena MT 59620

TOTAL: \$**PAGE** 1 **of** _____

Office Use Only:

SV-15 (revised 9/18) Total Epi: _____ Total DSA: _____ Total: _____